

Datapoint

Information from the Division of Health Care Finance and Policy Massachusetts Acute Care Hospital Inpatient Discharges

Q1 FY98 (October 1 through December 31, 1997) versus Q1 FY99 (October 1 through December 31, 1998)

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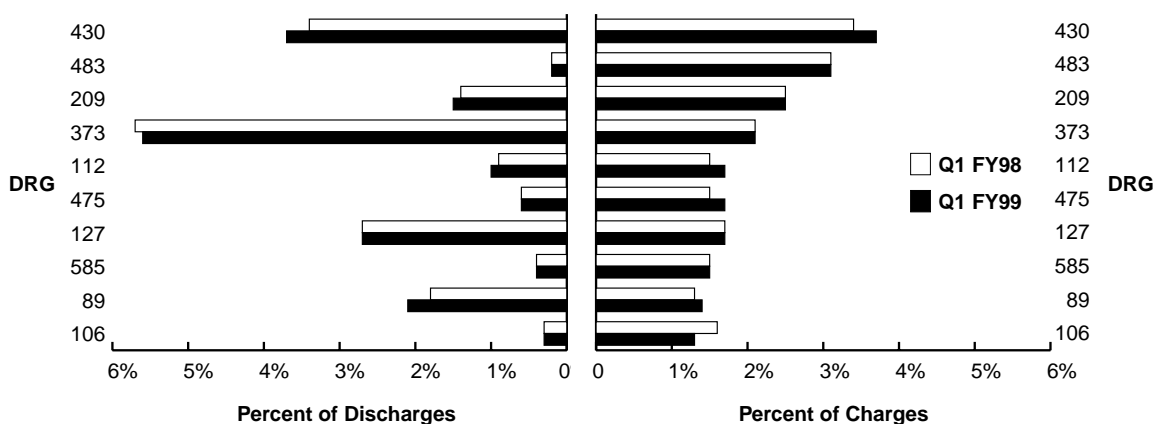
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Number 1 June 1999

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Top Ten DRGs Ranked by Percent of Charges



Note: See table below for DRG labels. DRGs are based on the 3M All-Patient Grouper, version 12, and ranked according to percent of total charges for Q1 FY99.

Mean Charges per Discharge and Length of Stay for Top Ten DRGs

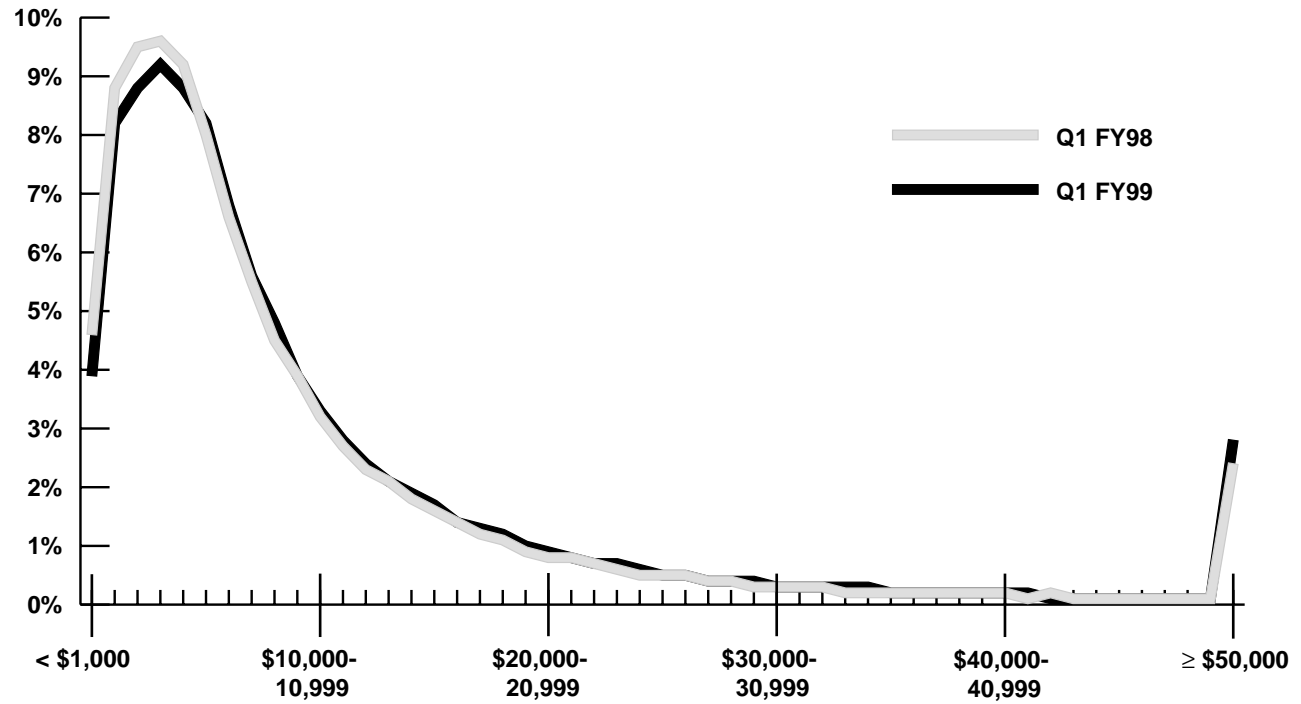
Welcome to the first issue of *Datapoint*.

Datapoint is a quarterly publication that highlights the most current information available about the Massachusetts short stay acute care hospital industry. To obtain additional copies or to share your comments and suggestions for future editions, please contact the Division of Health Care Finance and Policy Office of Communications at (617) 988-3125.

DRG	Mean Charges per Discharge		Mean LOS	
	Q1 FY98	Q1 FY99	Q1 FY98	Q1 FY99
430: Psychoses	\$10,778	\$11,272	10.3	10.4
483: Tracheostomy except for face, mouth and neck diagnosis	\$144,582	\$149,703	36.5	34.1
209: Major joint and limb reattachment procedure of lower extremities	\$18,705	\$19,114	4.7	4.5
373: Vaginal delivery without complications	\$3,928	\$4,296	2.2	2.2
112: Percutaneous cardiovascular procedure without AMI	\$18,230	\$20,052	2.3	2.3
475: Respiratory system diagnosis with ventilator support	\$28,115	\$30,240	10.9	10.6
127: Heart failure and shock	\$6,861	\$7,071	4.6	4.5
585: Major stomach, esophageal, duodenal, small and large bowel procedure with major CC	\$41,962	\$45,889	15.4	15.9
89: Simple pneumonia and pleurisy age>17 with CC	\$7,287	\$7,423	5.2	5.1
106: Coronary bypass with cardiac catheterization	\$48,947	\$52,229	9.0	9.0

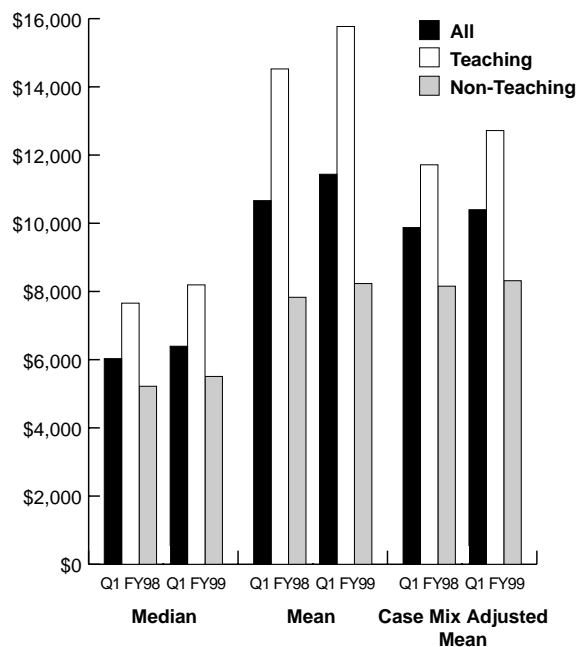
Note: AMI = acute myocardial infarction, CC = complications or comorbidities

Distribution of Total Charges per Discharge

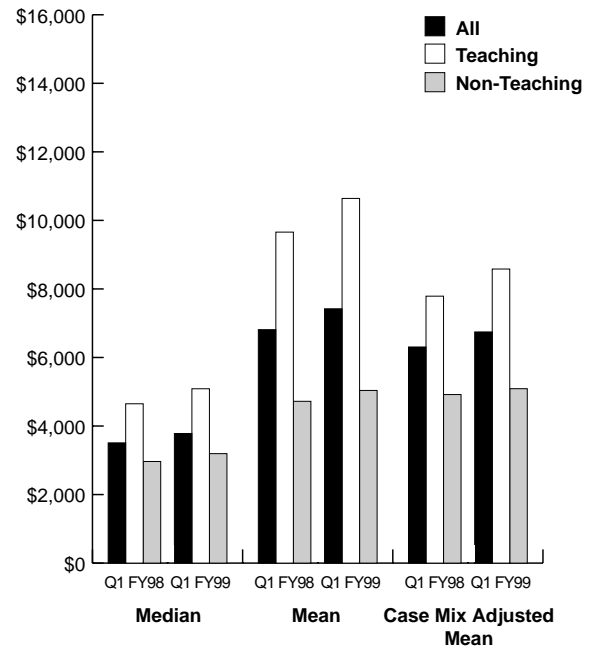


Note: Lines represent percent of discharges in each \$1,000 charge interval.

Total Charges per Discharge

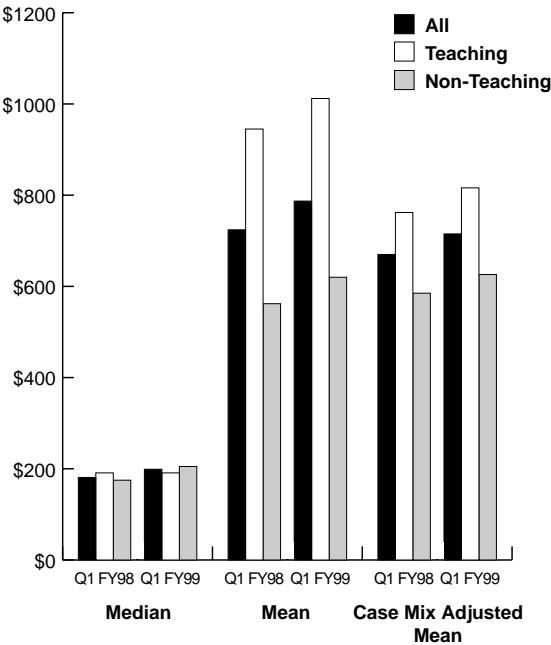


Ancillary Charges per Discharge

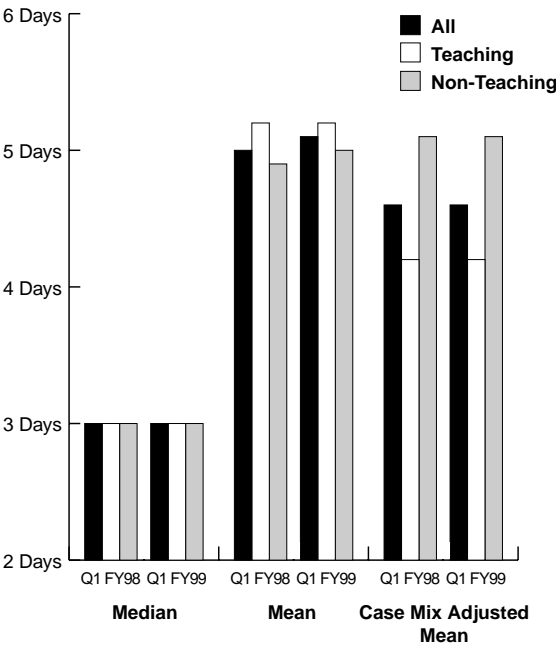


Note: Ancillary charges include all charges except those for routine and special accommodations.

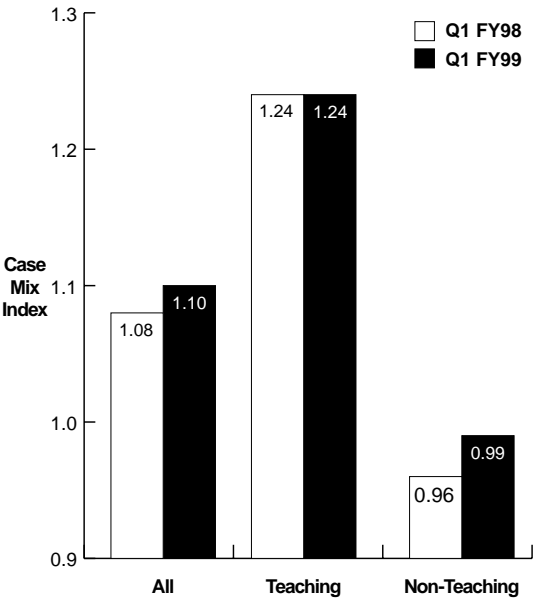
Pharmacy Charges per Discharge



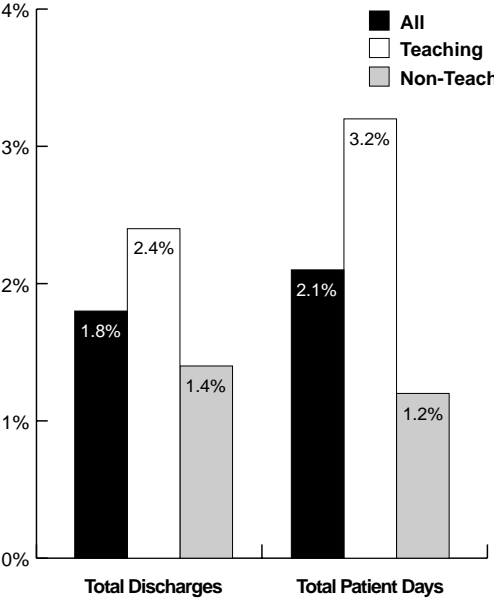
Length of Stay



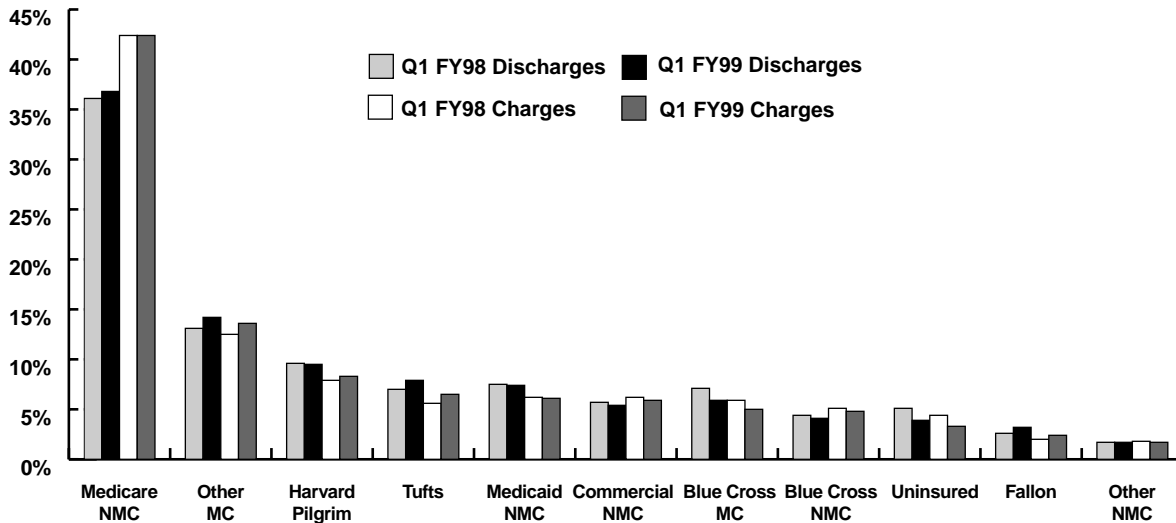
Case Mix Index



Percent Increase in Discharges and Days (Q1 FY98 to Q1 FY99)

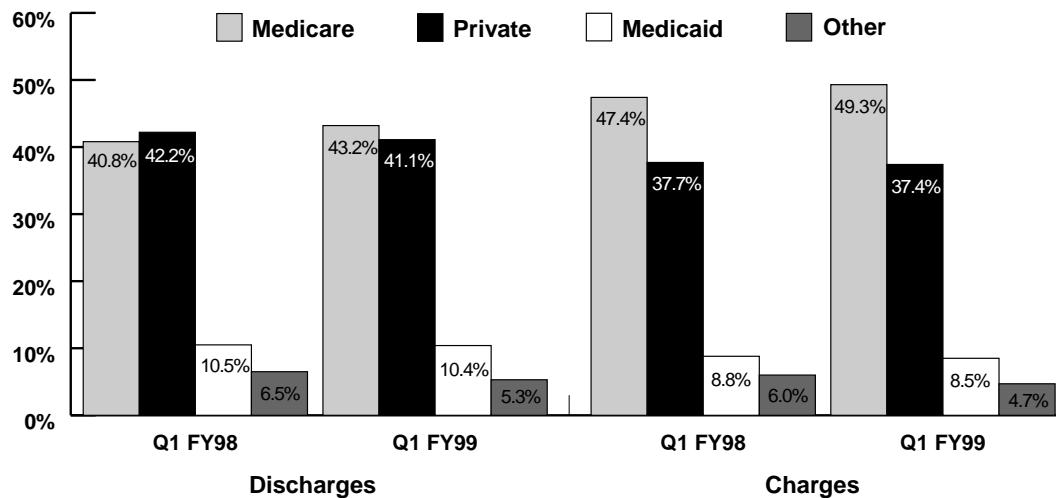


Payer Categories by Percent of Discharges and Charges



Note: Ranked by percent of total charges statewide Q1 FY99. MC = managed care. NMC = non-managed care. "Other MC" includes Health New England, US Healthcare, Medicaid primary care clinician, Massachusetts Behavioral Health Partnership, other HMOs, PPOs, and POSs. "Other NMC" includes: Workers' Compensation and other government payment.

Government and Private Payers by Percent of Discharges and Charges



Note: "Other" includes workers' compensation and other government payment.

Endnotes

Statistics for the first quarter of FY99 (10/1/98 to 12/31/98) are based on short stay acute hospital inpatient discharge data received as of 4/16/99; some data that failed DHCFF edits have been included. Seventy-five of 81 Massachusetts short stay acute care hospital campuses are included in the analysis. Statistics for Q1 FY98 are based on data from all Massachusetts short stay acute care hospitals which have passed DHCFF edits. Statistics for the current quarter will be updated on our website (www.state.ma.us/dhcfp) when complete data are available.

The following hospital campuses are categorized as teaching hospitals: Baystate, Berkshire, Beth Israel, Boston Medical Center/East Newton Street, Boston Medical Center/Harrison Avenue, Brigham and Women's, Cambridge, Carney, Children's, Dana Farber, Deaconess, Faulkner, Lahey, Mass. Eye and Ear, Mass. General, Memorial, Mount Auburn, New England Medical Center, Saint Vincent, University of Mass.

Charges are not inflation-adjusted and do not represent costs or payments.

Case mix index is calculated using Massachusetts cost weights (base year = FY93) for the 3M All-Patient Grouper, version 12.

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